lication or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

09938 210

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			34		TOOIG			RATE	FEE	0n 1	RATE	FEE
FOR			NUMBER FILED		NUMB	MBER EXTRA		BASIC FEE	355.00	OB	BASIC FEE	
TOTAL CHARGEABLE CLAIMS			64 minus 20=		. 44		l	X\$ 9=		OR	X\$18=	792
INDEPENDENT CLAIMS			3 minus 3 =		• 0		ŀ	X40=		OR	X80=	1,00
MU	LTIPLE DEPEN	IDENT CLAIM P				Ø	t	+135=	·	OR	+270=	270
* If	th difference	in column 1 is	less than z	zero, enter "0" in column 2			· L	TOTAL		OR	TOTAL	1772
CLAIMS AS AMENDED - PART II								¥			OTHER	THAN
(Column 1) (Column 2) (Column								SMALL	ENTITY	OR	SMALL I	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	·	RATE	ADDI- TIONAL FEE
	Total	• 27	Minus	** 3	f	=		X\$ 9=		OR	X\$18=	
	Ind pendent	* NTATION OF MI	Minus	1 *** 3		=		X40=		OR	X80=	
	FINST PRESE	NIATION OF MI	JLTIPLE DE	PENDEN	CLAIM			+135=	* • • •	OR	+270=	i i
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)								NDDII. FEE (		,	ADDII. FEE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	IEST BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		=		X\$ 9=	`	OR	X\$18=	
	Independent	*	Minus	***		=		X40=		OR	X80=	
_	FIRST PRESE	NTATION OF M	JETIPLE DE	PENDEN	CLAIM		╵╏	+135=		OR	+270=	
			•				L	TOTAL		OR	TOTAL ADDIT. FEE	1
		(Column 1)		(Colui	mn 2)	(Column 3)	^	DDIT. FEE			ADDII. FEEI	-
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	IEST BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		=	I	X\$ 9=		OR	X\$18=	
	Indep ndent	*	Minus	***		=		X40=	*	OR	X80=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									On		
	If the entry in activ	mn t is less than t	ha antre in co	lump 2 west	a "O" in co	lumn 3		+135=		OR	+270=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If th "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
		nber Previously Pa					r four	nd in the app	oropriate box	in col	umn 1.	